

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

9/938,444

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

Appt RCE
11/16/04

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total	* 21	Minus	** 20	= 1
Independent	* 3	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY
TYPE

OR OTHER THAN
SMALL ENTITY

RATE	Fee	RATE	Fee
BASIC FEE	150.00	BASIC FEE	300.00
X\$ 25=		X\$50=	
X100=		X200=	
+180=		+360=	
TOTAL		TOTAL	

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		X\$50=	12.00
X100=		X200=	
+180=		+360=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	12.00

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total	* *	Minus	**	=
Independent	* *	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		X\$50=	
X100=		X200=	
+180=		+360=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total	* *	Minus	**	=
Independent	* *	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		X\$50=	
X100=		X200=	
+180=		+360=	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gary Greenfield, et al.

Attorney Docket No.: SRI1P037/US-3979-3

Application No.: 09/938,444

Examiner: Bret C. Hayes

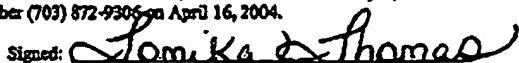
Filed: August 23, 2001

Group: 3644

Title: CONTAINER FOR EXPLOSIVE DEVICE

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office, Attention: Examiner Hayes, Central Facsimile telephone number (703) 872-9306 on April 16, 2004.

Signed: 
Tomika Thomas

REQUEST FOR CONTINUED EXAMINATION (RCE)
(37 CFR §1.114)

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) of the above-identified application.

NOTE: If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 C.F.R. §1.53(d) instead of an RCE to be eligible for the patent term adjustment provisions of the AIPA.

1. Submission required under 37 C.F.R. §1.114:

- a. Previously submitted
 - i. Consider the amendment/reply under 37 C.F.R. §1.116 previously filed on _____.
(Any unentered amendment referred to above will be entered.)
 - ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
 - iii. Other _____.
- b. Enclosed
 - i. Amendment/Reply
 - ii. Affidavit/Declaration
 - iii. Information Disclosure Statement with Form PTO-1449
 - Copies of IDS Citations
 - iv. Other _____.

03/18/2005 MNICHOLS 00000007 500388 09938444

01 FC:1801 770.00 DA
02 FC:1202 18.00 DA

Updated 04/03, Pat Prosec Trans 114 RCE

Page 1

PAGE 2/9 *RCVD AT 4/16/2004 4:26:54 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-13 * DNIS:8729306 * CSID: * DURATION (mm:ss):02:30

2. Fees: (The RCE fee is required at the time the RCE is filed.)

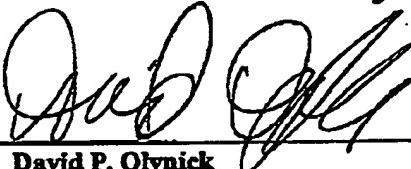
Fee Calculation (37 CFR §1.16)

Fee for Request for Continued Examination Under 37 C.F.R. §1.17(e)	\$770 =	770.00
	TOTAL	\$770.00
SMALL ENTITY 50% FILING FEE REDUCTION (if applicable)		

- a. Applicant hereby petitions for a 3 month extension of time.
- b. Applicant believes that no (additional) extension of time is required; however, if it is determined that such an extension is required, Applicant hereby petitions that such an extension be granted and authorizes the Director to charge the required fees for an extension of time under 37 CFR §1.136 to Deposit Account No. 500388.
- c. Enclosed is our Check No. in the amount of \$ to cover the RCE fee, extension of time and additional fees.
- d. The Director is authorized to charge any fees beyond the amount enclosed which may be required, or to credit any overpayment, to Deposit Account No. 500388 (Order No. SRI1P037)
3. Please continue to send correspondence to the following address:

Customer Number 022434

022434



David P. Olynick
Registration No. 48,615

Date: April 16, 2004